SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO: **Bayfield County** Planning and Zoning Depart. PO Box 58 Washburn, WI 54891

(715) 373-6138

APPLICATION FOR PERMIT BAYFIELD COUNTY, WISCONSIN



Permit #:	21-0325
Date:	10-10-21
Amount Paid:	175-10-10-21
Refund:	dak

INSTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Department. Bayfield Co. Zoning Dept.

TYPE OF PERMIT REQUESTED → X LAND USE □ SANITARY □ PRIVY □ C	CONDITIONAL USE SPECIAL USE B.O.A. OTHER
Owner's Name: Mailing Address: Mailing Address: Mailing Address: Mailing Address:	City/State/Zip: Telephone:
	Cr, WI 54847 Gell Phone: 28-4885123
	Plumber: Plumber Phone:
Authorized Agent: (Person Signing Application on behalf of Owner(s)) Agent Phone:	Agent Mailing Address (include City/State/Zip): Written Authorization Attached Yes □ No
PROJECT LOCATION Legal Description: (Use Tax Statement) A0143	Recorded Document: (Showing Ownership)
1/4,1/4 Gov't Lot Lot(s) CSM Vol & Page CSM Doc VII 23 73 02	c# Lot(s)# Block # Subdivision: H H H MES Second Add
Section 18, Township 47 N, Range 08 W Town of:	1 RIVER Lot Size Acreage 0.630
Creek or Landward side of Floodplain? If yescontinue Is Property/Land within 1000 feet of Lake, Pond or Flowage If yescontinue Distribution	istance Structure is from Shoreline :feetfeet istance Structure is from Shoreline :feetfeetfeetfeetfeet
Non-Shoreland	
* include donated time Project # of Stories Foundation	Total # of
☐ New Construction ☐ 1-Story ☐ Basement	☐ 1 ☐ Municipal/City ☐ City
□ Addition/Alteration □ 1-Story + □ Foundation □ 1-Story + □ Foundatio	(New) Sanitary Specify Type: Well
	Sanitary (Exists) Specify Type:
Assessed Relocate (existing bldg)	□ □ Privy (Pit) or □ Vaulted (min 200 gallon)
Run a Business on Use	□ None □ Portable (w/service contract)
Property	☐ Compost Toilet
8 STR	□ None
Existing Structure: (if addition, alteration or business is being applied for) Length:	Width: Height:

Proposed Use	1	Proposed Structure	Dimensions	Square
	П	Principal Structure (first structure on property)	(X)	Footage
	П	Residence (i.e. cabin, hunting shack, etc.)	(X)	
		with Loft	(X)	
Residential Use		with a Porch	(X)	
		with (2 nd) Porch	(X)	-
		with a Deck	(X)	
	.8	with (2 nd) Deck	(X)	
☐ Commercial Use		with Attached Garage	(x)	
		Bunkhouse w/ (\square sanitary, or \square sleeping quarters, or \square cooking & food prep facilities)	(X)	
		Mobile Home (manufactured date)	(X)	
☐ Municipal Use		Addition/Alteration (explain)	(X)	
		Accessory Building (explain)	(X)	
		Accessory Building Addition/Alteration (explain)	(X)	
	R.	Special Use: (explain) Shott - telm lental	1 58 × 14)	812
		Conditional Use: (explain)	(X)	0,0
		Other: (explain)	(X)	

FAILURE TO OBTAIN A PERMIT or STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

Owner(s):

Under the providing in or with this application of the providing in or with this application of the purpose of inspection.

(If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

Authorized Agent:

Date

(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Attach
Copy of Tax Statement If you recently purchased the property send your Recorded Deed

In the box below: Draw or Sketch your Property (regardless of what you are applying for)

Show Location of: **Proposed Construction** Show / Indicate: North (N) on Plot Plan

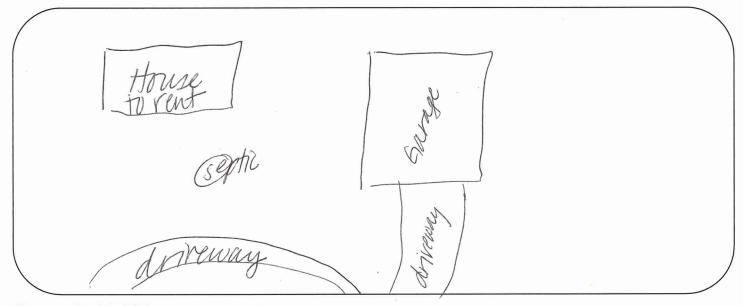
(2)(3)Show Location of (*): (*) Driveway and (*) Frontage Road (Name Frontage Road)

(4)Show: All Existing Structures on your Property

(5) Show: (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P)

(*) Lake; (*) River; (*) Stream/Creek; or (*) Pond Show any (*): (6)

(*) Wetlands; or (*) Slopes over 20% Show any (*): (7)



Please complete (1) - (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

Fill Out in Ink - NO PENCIL

(8) Setbacks: (measured to the closest point)

Description	Setback Measurements			Description	Setback Measurements		
Setback from the Centerline of Platted Road	110	Feet	VALUE OF	Setback from the Lake (ordinary high-water mark)		Feet	
Setback from the Established Right-of-Way	77	Feet		Setback from the River, Stream, Creek	-	Feet	
	19			Setback from the Bank or Bluff		Feet	
Setback from the North Lot Line	85	Feet			1		
Setback from the South Lot Line	77	Feet		Setback from Wetland	L.I.	Feet	
Setback from the West Lot Line	30	Feet		20% Slope Area on the property	☐ Yes	□ No	
Setback from the East Lot Line	62	Feet		Elevation of Floodplain		Feet	
	-	-			-		
Setback to Septic Tank or Holding Tank	20	Feet		Setback to Well	30	Feet	
Setback to Drain Field	40	Feet			9		
Setback to Privy (Portable, Composting)							

other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For the Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code. The local Town, Village, City, State or Federal agencies may also require permits.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

Issuance Information (County Use Only)	1282	# of bedrooms: 2	Sanitary Date: 7-8-05		
Permit Denied (Date):	Reason for Denial:				
Permit #:	Permit Date:				
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming Yes (Deed of Recor	ious Lot(s)) 🔲 No	Mitigation Required Mitigation Attached	☐ Yes ☐ No ☐ Yes ☐ No	Affidavit Required	
Granted by Variance (B.O.A.) ☐ Yes ☑ No Case #:		Previously Granted by	/ Variance (B.O.A.)	±#:	
Was Parcel Legally Created Was Proposed Building Site Delineated Was Proposed Building Site Delineated		Were Property Lines Represented by Owner Was Property Surveyed Yes U Yes			
Inspection Record: Existing residence Appeals	e proposed to	or STR.		Zoning District (RH) Lakes Classification (—)	
Date of Inspection: $9 - 29 - 21$			l	Date of Re-Inspection:	
Condition(s): Town, Committee or Board Conditions Atta Must obtain a Tourist i to renting. Rental Can a on Septic System Sizing.	A - 12 D V D N- UE	No the consend to be atte	Boyfield Cou ted as a		
Signature of Inspector: Told Norvor	d			Date of Approval:	
Hold For Sanitary: Hold For TBA:	Hold For Affic	davit: 🗆	Hold For Fees: 🗌	_	

TOWN BOARD RECOMMENDATION -- (CLASS A - SPECIAL USE)

Residence in Ag-1 or F-1; Shoreland Grading; Short-Term Rental (1 unit); Signage; RV Ext

When Town Board has completed this form, please mail to:

Bayfield County Planning and Zoning Department P.O. Box 58 – Washburn, WI 54891 Phone – (715) 373-6138 Fax – (715) 373-0114

e-mail: zoning@bayfieldcounty.org

Website: www.bayfieldcounty.org/147

Date Zoning Received: (Stamp Here)

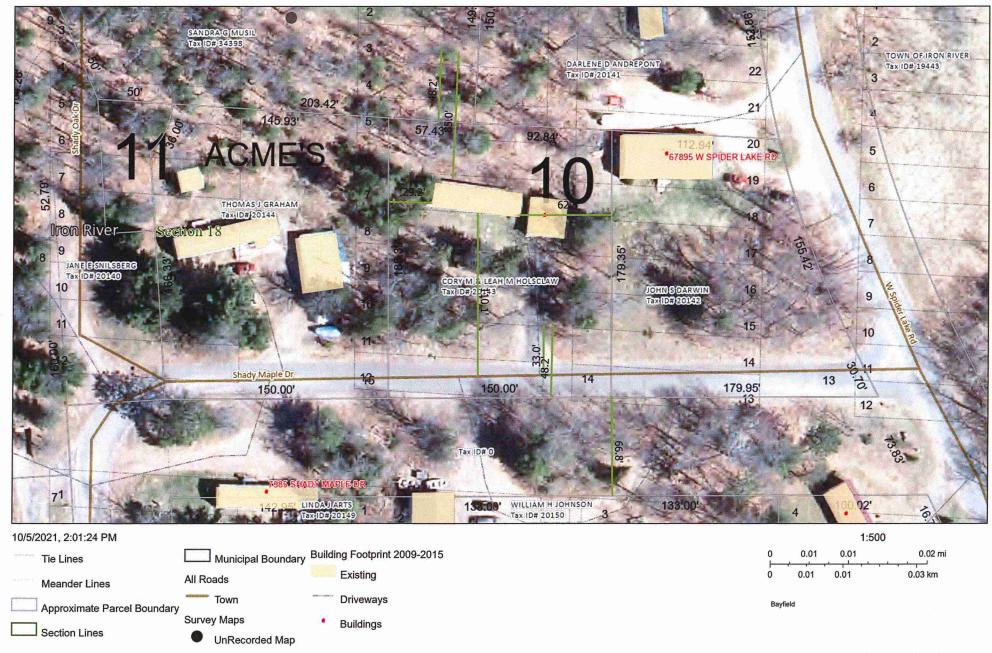
SEP 15 2021

Bayfield Co.
Planning and Zoning Agency

Property Owner(s) are responsible to give this form to the Town Clerk. Attach a copy of the County Application (8 ½ x 14) [front/back]. This is a Class A special use request. Note: The Town's Planning Commission meets prior to the Town. Once the Town meets they will forward their recommendation to the Planning and Zoning Department. Ask Town if you should be present at their meeting(s).

1 1 1 1 1 1 1 1	
Property Owner Cong M + Leah M HolsdawContractor_	
$1/\sqrt{1}$	
TMRIVU, WI 54847 Agent's Telephone	
Telephone 218-591-0795 Written Authorizat	
Accurate Legal Description involved in this request (specify only the property in $1/4$ of $1/4$, Section $1/8$, Township $1/4$, Range $1/4$, W.	volved with this application) Town of The River
Govt. Lot <u>F</u> Lot <u>14</u> Block <u>4</u> Subdivision <u>ACMES SECO</u>	nd Add csm#
Volume <u>1133</u> Page <u>303</u> of Deeds Tax I.D# <u>20143</u>	
Additional Legal Description:	
Applicant: (State what you are asking for) Zoning District: R4 Short Term Rental Permit	Lakes Classification
	The state of the s
We, the Town Board, TOWN OF TON River	, do hereby recommend to
☐ Table ■ Approval	☐ Disapproval
Have you reviewed this for Compatibility with the Comprehensive and/or L	The state of the s
Township: (In detail clearly state Town Board's reason for recommendation of ta	
	bling, approval or disapproval)
	bling, approval or disapproval)
	bling, approval or disapproval)
Signed:	
** THE FOLLOWING MUST BE INCLUDED WITH THIS FORM: Chairman:	bling, approval or disapproval)
** THE FOLLOWING MUST BE INCLUDED WITH THIS FORM: 1. The Tabled, Approval or Disapproval box checked 2. The Town's reasoning for the tabling, approval or disapproval 3. The form returned to Zoning Department not a conv. or fax	
** THE FOLLOWING MUST BE INCLUDED WITH THIS FORM: 1. The Tabled, Approval or Disapproval box checked 2. The Town's reasoning for the tabling, approval or disapproval Supervisor:	
** THE FOLLOWING MUST BE INCLUDED WITH THIS FORM: 1. The Tabled, Approval or Disapproval box checked 2. The Town's reasoning for the tabling, approval or disapproval 3. The form returned to Zoning Department not a copy or fax Supervisor: ** NOTE: Receiving Town Board approval, does not allow the start of construction or business, you must first obtain your	

Bayfield County, WI



ESN:

Real Estate Bayfield County Property Listing

Today's Date: 10/5/2021

Property Status: Current

Created On: 3/15/2006 1:15:35 PM

Updated: 4/7/2014

CORY M & LEAH M HOLSCLAW

IRON RIVER WI

Billing Address: Mailing Address: CORY M & LEAH M HOLSCLAW CORY M & LEAH M PO BOX 622

HOLSCLAW

IRON RIVER WI 54847

Ownership

PO BOX 622

IRON RIVER WI 54847

Site Address

* indicates Private Road

7610 SHADY MAPLE DR

IRON RIVER 54847

Property Assessment

Updated: 8/2/2012

. Topelty Absessincing					
2021 Assessment Detail			***************************************		
Code	Acres	Land	Imp.		
G1-RESIDENTIAL	0.630	11,300	39,700		
2-Year Comparison	2020	2021	Change		
Land:	11,300	11,300	0.0%		
Improved:	39,700	39,700	0.0%		
Total:	51,000	51,000	0.0%		



Property History

N/A

Updated: 3/15/2006

Description Updated: 4/7/2014 Tax ID: 20143 04-024-2-47-08-18-1 00-101-12000 PIN: Legacy PIN: 024110605014 Map ID: Municipality: (024) TOWN OF IRON RIVER STR: S18 T47N R08W ACME'S SECOND ADD LOT 14 BLOCK 4 Description: IN V.1123 P.303 Recorded Acres: 0.000 Calculated Acres: 0.632 Lottery Claims: 0 First Dollar: Yes Zoning: (R-4) Residential-4

118

Tax Districts Updated: 3/15/2006 1 STATE 04 COUNTY 024 TOWN OF IRON RIVER 163297 SCHL-MAPLE 001700 **TECHNICAL COLLEGE** 047030 IRON RIVER SANITARY #1

Recorded Documents WARRANTY DEED

Date Recorded: 4/3/2014 2014R-553836 1123-303

Grantee: CORY M & LEAH M HOLSCLAW

Sale Price: 85000 0 Acres

SHERIFFS DEED ON FORECLOSURE

Date Recorded: 8/8/2013 2013R-550820 1112-286

Grantee: CHIPPEWA VALLEY BANK

Sale Price: 69000 0 Acres

CONVERSION

Date Recorded: 499953 866-556;920-548

Grantee: CORY M & LEAH M HOLSCLAW

Sale Price: 0 0 Acres

WARRANTY DEED

Date Recorded: 6/20/2005 2005R-499953 920-548

Grantee: CORY M HOLSCLAW & LEAH M HOLSCLAW

Sale Price: 12500 0 Acres

WARRANTY DEED

Date Recorded: 8/7/2003 2003R-484433 866-566

Grantee: CARL J MELCHIORS AND MICHELE M MELCHOIRS

Sale Price: 3660 0 Acres

Town, City, Village, State or Federal Permits May Also Be Required

LAND USE - X
SANITARY - (Existing-467282)
SIGN SPECIAL (A) - X (Tw of Iron River-9/15/2021)
CONDITIONAL BOA -

BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

No.	21-03	25	Issued	To: Co	ry &	Leah Holsc	law						
Locatio	on:	1⁄4 of	1/4	Section	18	Township	47	N.	Range	8	W.	Town of	Iron River
Gov't Lo	ot	Lot	14	Block	4	Subdivisio	n A	cmes	Secon	d Ad	dition	CSM#	
or: F	Residential			nit Short Any future		n Rental]		would i	es autires a de	litiono	l normit	ting	
Condi			n a Tou	rist Hous	sing	License fro	m th	e Bay	field Co	unty			prior to renting
-	R	ental only	n a Tou / permi	rist Hous tted as a	sing 2 be	License fro droom per	m the	e Bay ic sys	field Co	unty	Healt		orior to renting
-	R	ental only	n a Tou / permi	rist Hous tted as a	sing 2 be	License fro	m the	e Bay ic sys	field Co	unty ng.	Heal	th Dept p	od, AZA
Condit	This permit e work or land	ental only xpires one ye use has not b lans or speci- nay be void on	n a Tou permi ear from da begun. fications s	trist House tted as a ate of issuan thall not be n if any of the	2 be ce if the cade was applicated	License from droom per seauthorized consistency of the constant of the constan	m the septionstruct	e Bay ic sys ion	field Co	unty ng.	Healt Todo	th Dept p	od, AZA Official

SUE STA COMPLETED APPLICATION, TAX ENT AND FEE TO: **Layfield County** Planning and Zoning Depart. PO Box 58 Washburn, WI 54891 (715) 373-6138

APPLICATION FOR PERMIT BAYFIELD COUNTY, WISCONSIN



The state of the s	
Permit #:	21-0326 Es
Date:	10-10-21
Amount Paid:	175-10-10-3/
Refund:	

Copy of Tax Statement

If you recently purchased the property send your Recorded Deed

INSTRUCTIONS: No permits will be issued until all fees are paid.
Checks are made payable to: Bayfield County Zoning Department.

DO NOT START CO	NSTRUCTIO	ON <u>UNTIL</u>	ALL PERMITS	HAVE BEEN ISSUED TO	APPLICANT. Orig	ginal A	pplication MU	ST be submitted	FILL OUT IN INK	(NO PENCIL)
TYPE OF PERMIT	REQUES	TED-	- 3	LAND USE SA	NITARY PRIN	/Y [CONDITION	AL USE SPECIAL	USE B.O.A.	□ OTHER
Owner's Name:	Polsa	law	+ Lea	h Holsclaw	lailing Address:	22		City/State/Zip:	W15484	Telephone:
Address of Proper	ty:	Dei	10 0	nad	City/State/Zip:	1	Nel	11 17 18/1	7	Ť
Contractor:	10	PSK	1C R	vo a	ontractor Phone:	KI	Plumber:	11 5984	/	Cell Phone:
					ontractor Filone.		Flumber:			Plumber Phone:
Authorized Agent:	(Person Sig	gning Appl	ication on beha	alf of Owner(s)) A	gent Phone:		Agent Maili	ng Address (include City,	/State/Zip):	Written
										Authorization Attached
					T15#					☐ Yes ☐ No
PROJECT LOCATION	Lega	Descrip	tion: (Use 1	Tax Statement)	Tax ID#	282	197	1	Recorded Document:	(Showing Ownership)
	1/11)		Gov't Lot	Lot(s) CSN	// Vol & Page	CSM	Doc# le	sts\# Block #		30413
_/\W_1/4, /	VW	1/4	3071201	Louis Com	voi a rage	CSIVI	DOC#	ot(s) # Block #	Subdivision:	
Section	3, Tou	nship L	-17 N.F	Range X W	Town of:	_	Pine		Lot Size	Acreage
•	COVE I				1-17	M	KINER		371837	8.67
الأكثار	☐ Is Cree	Property	//Land withi	in 300 feet of River, 9 of Floodplain?	Stream (incl. Intermitte		Distance Struc	cture is from Shoreline	1	Ara Motlande
Shoreland _				n 1000 feet of Lake,		-		- 00	Zone?	Present?
	13	rioperty	// Lanu With		If yescontinue -	→	Distance Struc	cture is from Shoreline f	inot les	Yes
Non-Shoreland	d								No	
Value at Time of Completion							Total # of	Wh	at Type of	Type of
* include		Projec	t	Project # of Stories	Project Foundation		bedrooms		nitary System(s)	Water
donated time & material				4 of Stories	1 oundation		on property		ne property <u>or</u> n the property?	on property
1	☐ New	Constr	uction	1-Story	Basement		1	☐ Municipal/City		City
	□ Addi	tion/Al	teration	1-Story +	Foundation		2	☐ (New) Sanitary	Specify Type:	Well
\$ 130,000				Loft				Sanitary (Exists	Chacify Type	- Joseph
	□ Conv			☐ 2-Story	Slab		3	Conveyt		<u> </u>
			sting bldg)				0	☐ Privy (Pit) or	\square Vaulted (min 20	0 gallon)
•	Prop	a Busin	ess on		Use ☐ Year Round		None	☐ Portable (w/ser		
-	XS	5/18			☐ Year Round			☐ Compost Toilet☐ None	i	
						- 2000				
Proposed Const	re: (if add	lition, alt	eration or bu	siness is being applied	for) Length:	4	le	Width: 30	Height	
Troposou const		TOVETC	in difficition	13)	Length.			Width:	Height	
Proposed L	Jse	1			Proposed Stru	ıcture			Dimensions	Square
			Principal	Structure (first str	ructure on prope	rtv)			(X	Footage
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Residentia	l Use			with Loft			(x			
				with a Porch	1.	(X				
				with (2 nd) Porch with a Deck	1		,.		(X	
				with (2 nd) Deck					(X)
Commercia	al Use			with Attached					(X)
			Bunkhou			ters, o	cooking &	food prep facilities)	(X	
	, the same of the								(x	
						•				
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In the box below: Draw or Sketch your Property (regardless of what you are applying for) (1) Show Location of: (2) Show / Indicate: (3) Show Location of (*): (4) Show: (5) Driveway and (*) Frontage Road (Name Frontage Road) (6) Show: (8) All Existing Structures on your Property

(5) Show:
(6) Show any (*):
(7) Show any (*):
(8) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P)
(*) Lake; (*) River; (*) Stream/Creek; or (*) Pond
(*) Wetlands; or (*) Slopes over 20%

**The prive (P) **

Please complete (1) - (7) above (prior to continuing)

(8) Setbacks: (measured to the closest point)

Changes in plans must be approved by the Planning & Zoning Dept.

Description	Setback Measurements			Description	Me	ements	
Setback from the Centerline of Platted Road	243	Feet		Setback from the Lake (ordinary high-water mark)	et ann	_	Feet
Setback from the Established Right-of-Way	210	Feet		Setback from the River, Stream, Creek	-	_	Feet
				Setback from the Bank or Bluff	-	-	Feet
Setback from the North Lot Line	1000	Feet					
Setback from the South Lot Line	300	Feet	New Y	Setback from Wetland	_		Feet
Setback from the West Lot Line	115	Feet		20% Slope Area on the property		Yes	□ No
Setback from the East Lot Line	245	Feet		Elevation of Floodplain		1	Feet
					_		
Setback to Septic Tank or Holding Tank	20	Feet		Setback to Well	- 3	20	Feet
Setback to Drain Field	30	Feet					
Setback to Privy (Portable, Composting)	*	Feet	696				

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.

For the Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.

The large Town Villege City State of Federal aggregation may also require posmits.

The local Town, Village, City, State or Federal agencies may also require permits.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

Issuance Information (County Use Only)	Sanitary Number: 2	1-385	Sanitary Date: 5-18-21			
Permit Denied (Date):	Reason for Denial:					
Permit #:	Permit Date:					
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming Yes (Deed of Recomplete Continuous Continuou	guous Lot(s)) No	Mitigation Required Mitigation Attached	☐ Yes ☐ No☐ Yes ☐ No	Affidavit Required Affidavit Attached		
Granted by Variance (B.O.A.) ☐ Yes ☐ No Case #:		Previously Granted by Ves No		e #:		
	o	Were Property Line				
Inspection Record: Recently permittees STR. Appears C	ed new house ode compliant	e proposed	for	Zoning District (\$\mathcal{F}(\)) Lakes Classification ()		
	Inspected by:					
Condition(s): Town, Committee or Board Conditions At Must obtain a Tourist Prior to renting Rental of Sizing			bedroom pur	unty Health Dept.		
Signature of Inspector: Todd Nov	vood			Date of Approval:		
Hold For Sanitary: Hold For TBA:	Hold For Affi	idavit: 🗆 Hold For Fees: 🗆 🗆				

TOWN BOARD RECOMMENDATION - - (CLASS A - SPECIAL USE)
Residence in Ag-1 or F-1; Shoreland Grading; Short-Term Rental (1 unit); Signage; RV Ext

When Town Board has completed this form, please mail to:

Bayfield County Planning and Zoning Department P.O. Box 58 - Washburn, WI 54891 Phone - (715) 373-6138

Fax - (715) 373-0114

Revised: August 2018

u/forms/townboardrecommendation-ClassA

e-mail: zoning@bayfieldcounty.org

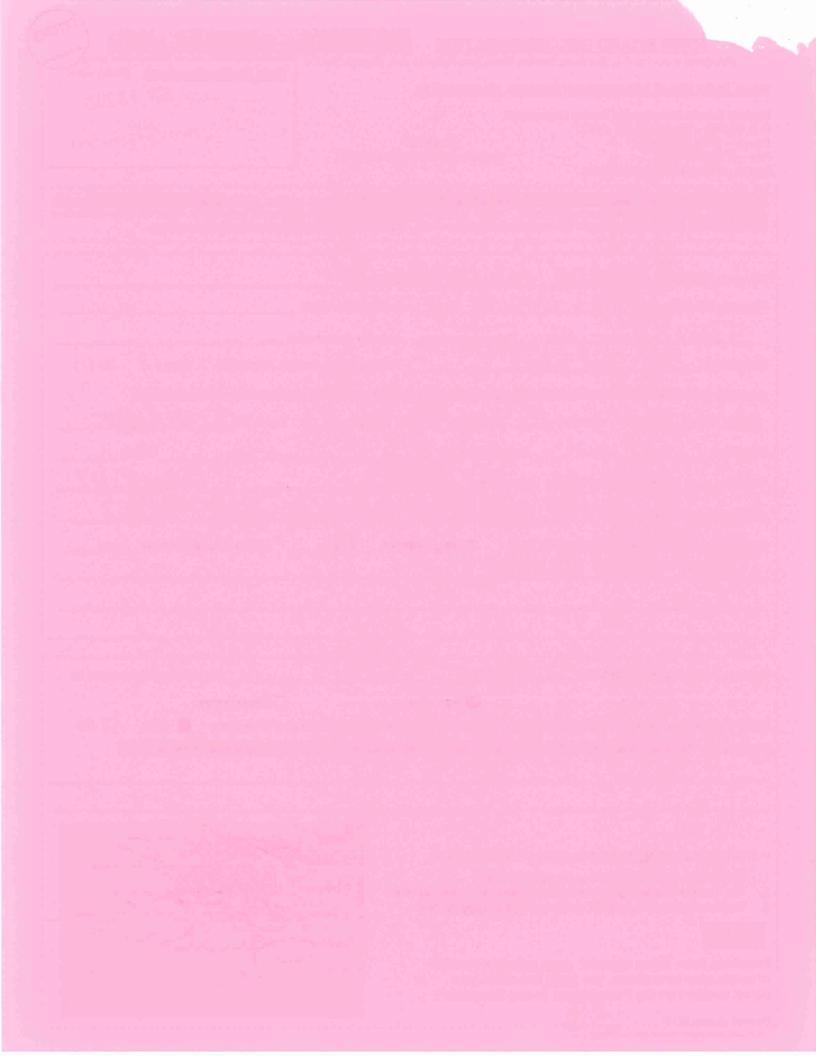
Website: www.bayfieldcounty.org/147 Date Zoning Received: (Stamp Here)

SEP 15 2021

Bayfield Co.
Planning and Zoning Agency

Property Owner(s) are responsible to give this form to the Town Cle [front/back]. This is a Class A special use request. Note: The Town's Planning will forward their recommendation to the Planning and Zoning Department. Ask To	Commission meets prior to the Town Once the Town meets they
Property Address 67863 10 psille Rd Author Agen	
We, the Town Board, TOWN OF ITON RIVES	, do hereby recommend to
☐ Table ♠ Approval	☐ Disapproval
Have you reviewed this for Compatibility with the Comprehens Township: (In detail clearly state Town Board's reason for recomme	
** THE FOLLOWING MUST BE INCLUDED WITH THIS FORM: 1. The Tabled, Approval or Disapproval box checked 2. The Town's reasoning for the tabling, approval or disapproval 3. The form returned to Zoning Department not a copy or fax ** NOTE: Receiving Town Board approval, does not allow the start of construction or business, you must first obtain your permit card(s) from the Planning and Zoning Department.	Signed: Chairman: Supervisor: Supervisor: Supervisor: Clerk: Date: 9/9/2021

Date:



Bayfield County, WI



First Dollar:

ESN:

Real Estate Bayfield County Property Listing

Today's Date: 10/5/2021

Property Status: Next Year

Created On: 5/19/2021 2:38:29 PM

IRON RIVER WI 54847

Description Updated: 5/19/2021 Tax ID: 38497 PIN: 04-024-2-47-08-13-2 02-000-60000 Legacy PIN: Map ID: Municipality: (024) TOWN OF IRON RIVER STR: S13 T47N R08W Description: PAR IN W 1/2 NW NW IN DOC 2021R-588157 Recorded Acres: 0.000 Calculated Acres: 8.670 Lottery Claims: 0

Tax Districts	Updated: 5/19/2021
1	STATE
04	COUNTY
024	TOWN OF IRON RIVER
163297	SCHL-MAPLE
001700	TECHNICAL COLLEGE

No

118

* Recorded Documents	Updated: 3/15/2006
■ WARRANTY DEED	
Date Recorded: 4/16/2021	2021R-588157
E WADDANTY DEED	

WARRANTY DEED
Date Recorded: 1/27/2021

■ CONVERSIONDate Recorded: 625-285;654-93;656-272

Ownership
CORY M & LEAH M HOLSCLAW

Updated: 5/19/2021 IRON RIVER WI

Billing Address: Mailing Address:

CORY M & LEAH M HOLSCLAW CORY M & LEAH M
PO BOX 622 HOLSCLAW
IRON RIVER WI 54847 PO BOX 622

Site Address * indicates Private Road

67863 TOPSIDE RD IRON RIVER 54847

Property Assessment Updated: N/A 2021 Assessment Detail Code Acres Land Imp. N/A 2-Year Comparison 2020 2021 Change Land: 0.0% 0 Improved: 0 0 0.0% Total: 0 0 0.0%

Property History

 Parent Properties
 Tax ID

 04-024-2-47-08-13-2 02-000-50000
 38449

HISTORY EE Expand All History

White=Current Parcels

2021R-586725

Pink=Retired Parcels

Tax ID: 19316 Pin: 04-024-2-47-08-13-2 02-000-20000 Leg. Pin: 024103307000
Tax ID: 38449 Pin: 04-024-2-47-08-13-2 02-000-50000

38497

This Parcel

Parents

Children

WARRANTY DEED

This deed, made between Noel G. Smith, Grantor,

and

Cory Holsclaw and Leah Holsclaw, husband and wife, as survivorship marital property, Grantee,

Witnesseth, That the said Grantor, for a valuable consideration conveys to Grantee the following described real estate in Bayfield County, State of Wisconsin:

As Described in Attached Addendum/Exhibit A

This is not homestead property.

DANIEL J. HEFFNER BAYFIELD COUNTY, N REGISTER OF DEEDS

2021R-588157

04/16/2021 02:33PM

TF EXEMPT #:
RECORDING FEE: \$30.00
TRANSFER FEE: \$85.50

PAGES: 2

Return to:

Cory Holsclaw and Leah Holsclaw

P.O. Box 622

Iron River, WI 54847

File No. 204417

Together with all and singular the hereditaments and appurtenances thereunto belonging; And the said grantor warrants that the title is good, indefeasible in fee simple and free and clear of encumbrances except exceptions, reservations, easements and restrictions of record, and will warrant and defend the same.

Dated this 15 day of April, 2021.

State of Wisconsin

) S.S.

Personally came before me this _______ day of April, 2021, the above named **Noel G. Smith** to me known to be the person(s) who executed the foregoing instrument and hereby acknowledge the same.

This instrument drafted by:
Michael S. Brandner
Gowey Abstract & Title Company Int. VOLKERS

Notary Public, State of Wisconsin

My Commission Expires: UC+30,2002

GOWEY Abstract & Title Company, Inc.

(800) 673-8710 • www.goweytitle.com

File Number:

204417

ADDENDUM/EXHIBIT A

A parcel of land located in the Northwest Quarter of the Northwest Quarter (NW1/4-NW1/4), Section Thirteen (13), Township Forty-seven (47) North, Range Eight (8) West, Town of Iron River, Bayfield County, Wisconsin, described as follows: Beginning at the corner common to Section 11, 12, 13 and 14, Township 47 North, Range 8 West; thence South 89° 53' 27" East, 295.87 feet to an iron rod located on the Westerly right of way of the Tri-County Corridor; thence along said right of way line South 15° 09' 24" East, 558.98 feet to the centerline of Topside Road; thence along said centerline of Topside Road, on a curve to the right, having a radius of 454.74 feet, a long chord bearing and distance of South 28° 01' 51" West, 393.67, 407.13 feet; thence continuing along said centerline South 53° 40' 46" West, 151.67 feet; thence continuing along said centerline, on a curve to the left, having a radius of 1385.10 feet, a long chord bearing and distance of South 48° 55' 45" West, 229.40 feet, 229.66 feet; thence North 01° 56' 06" East, 1128.76 feet to the Point of Beginning; containing 377,837 square feet, which is 8.67 acres, including Topside Road right of way.

For Informational Purposes Only, the above described lands are designated with the following:

Tax ID Number(s):

04-024-2-47-08-13-2 02-000-20000 (Parent)

Property Address(s):

Vacant Land on Topside Road

Iron River, WI 54847

Town, City, Village, State or Federal Permits May Also Be Required

LAND USE - X
SANITARY - X (21-38S)
SIGN SPECIAL (A) - X (Tw of Iron River-9/15/2021)
CONDITIONAL BOA -

BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

21-0326 Issued To: Cory & Leah Holsclaw No. Parcel in W ½ of the Location: NW 1/4 of Town of Iron River 13 Section Township Range 8 W. Gov't Lot Subdivision CSM# Lot Block **Residential Other:** [1-Unit Short-Term Rental] For: (Disclaimer): Any future expansions or development would require additional permitting Condition(s): Must obtain a Tourist Housing License from the Bayfield County Health Dept prior to renting. Rental only permitted as a 3 bedroom per septic system sizing. **Todd Norwood, AZA NOTE:** This permit expires one year from date of issuance if the authorized construction work or land use has not begun. **Authorized Issuing Official** Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found October 10, 2021 to have been misrepresented, erroneous, or incomplete. This permit may be void or revoked if any performance conditions are not Date completed or if any prohibitory conditions are violated.

SUBMIT: <u>COMPLETED</u> APPLICATION, TAX STATEMENT AND FEE TO:

Bayfield County Planning and Zoning Depart. PO Box 58 Washburn, WI 54891 (715) 373-6138

APPLICATION FOR PERMIT BAYFIELD COUNTY, WISCONSIN

Date Stamp (Received)

SEP 15 2021

Rayfield Co

	ENTER
Permit #:	21-03781
Date:	10-10-2
Amount Paid:	75-10-10-2
Refund:	

INSTRUCTIONS: No per Checks are made payab	le to: Bay	field Cour	nty Zoning De	partment.		anning and Zon	ing Agency		Re	tuna:			<u> </u>	
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Authorized Agent: (Person Sig	ning Applic	ation on hehal	f of Owner(s))	Agent F	Phone:	Agent Mai	ling Ado	dress (include City/	State /7in	١.	NA/wikk a u	A	
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			Accessory	Building Addi	tion/Alt	teration (speci	ify)			_ (Х)		

FAILURE TO OBTAIN A PERMIT or STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the

above described property at any leasopable time for the purpose of inspection.			
Owner(s): Mark h (Indasor	Qudi H	anderson)	Date 9/15/2021
(If there are Multiple Owners listed on the Deed All Owners must s	sign or letter(s) of authori	zation must accompany this application)	7.7

Authorized Agent: Date

(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Address to send permit

Special Use: (explain)

Other: (explain)

Conditional Use: (explain)

Attach

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		Property (regardless of what you a		
-	 Show Location of: Show / Indicate: Show Location of (*): Show: Show: Show: Show any (*): Show any (*): 	Proposed Construction North (N) on Plot Plan (*) Driveway and (*) Frontage R All Existing Structures on your P (*) Well (W); (*) Septic Tank (ST (*) Lake; (*) River; (*) Stream/C (*) Wetlands; or (*) Slopes over	roperty); (*)	y (P)
Please	complete (1) – (7) above (prior	to continuing)		
Please			Changes in plans must be approved by th	ne Planning & Zoning Dept.
Please	complete (1) – (7) above (prior (8) Setbacks: (measured to		Changes in plans must be approved by th	ne Planning & Zoning Dept.
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Setback fr Setback fr Setback fr Setback fr Setback fr Setback fr	Description om the Centerline of Platted Ros om the Established Right-of-War om the North Lot Line om the South Lot Line om the West Lot Line om the East Lot Line om the East Lot Line	Measurement Measurement Journal of the closest point) Measurement Journal of the closest point) Measurement Journal of the closest point) Feet Journal of the closest point) Measurement Feet Journal of the closest point) Measurement Feet Journal of the closest point) Journal of the closest point) Measurement Journal of the closest point) Measurement Journal of the closest point)	Description Setback from the Lake (ordinary high-water mark) Setback from the River, Stream, Creek Setback from the Bank or Bluff Setback from Wetland 20% Slope Area on property Elevation of Floodplain	Measurement 75 85 Feet Feet Feet Yes No
Setback fr Setback fr Setback fr Setback fr Setback fr Setback to Setback to Setback to	Description Om the Centerline of Platted Road om the Established Right-of-Ward om the North Lot Line om the South Lot Line om the West Lot Line om the East Lot Line Septic Tank or Holding Tank Drain Field Privy (Portable, Composting)	Measurement Measurement ad 75 65 Feet y 42 Feet 570 750 Feet 19 28 Feet 42 Feet 75 Feet 220 Feet 230 Feet Feet ten (10) feet of the minimum required setback, to	Description Setback from the Lake (ordinary high-water mark) Setback from the River, Stream, Creek Setback from the Bank or Bluff Setback from Wetland 20% Slope Area on property Elevation of Floodplain	Measurement 75 85 Feet Feet Feet Yes No Feet
Setback fr Setback fr Setback fr Setback fr Setback fr Setback to Setback to Setback to Setback to Prior to the plother previous	Description Om the Centerline of Platted Road om the Established Right-of-Ward om the North Lot Line om the South Lot Line om the West Lot Line om the East Lot Line Septic Tank or Holding Tank Drain Field Privy (Portable, Composting) Description	Measurement Measurement ad 75 65 Feet y 42 Feet 570 750 Feet 19 28 Feet 42 Feet 75 Feet 220 Feet 230 Feet ten (10) feet of the minimum required setback, tryeyor at the owner's expense.	Description Setback from the Lake (ordinary high-water mark) Setback from the River, Stream, Creek Setback from the Bank or Bluff Setback from Wetland 20% Slope Area on property Elevation of Floodplain Setback to Well	Measurement 75 85 Feet Feet Feet Yes No Feet
Setback fr Setback fr Setback fr Setback fr Setback to Setback to Setback to Prior to the plone previous	Description Om the Centerline of Platted Road om the Established Right-of-Ward of the South Lot Line om the West Lot Line om the East Lot Line om the East Lot Line om the Platted Road of the West Lot Line om the West Lot Line om the East Lot Line om the East Lot Line om the East Lot Line of the West Lot Line of the East L	Measurement Measurement Measurement Measurement Measurement Measurement Measurement Feet Feet 19 28 Feet 19 28 Feet 75 Feet 75 Feet 220 Feet 230 Feet Feet ten (10) feet of the minimum required setback, to reveyor at the owner's expense. han ten (10) feet but less than thirty (30) feet from the content of the minimum required setback, to reveyor at the owner's expense.	Description Setback from the Lake (ordinary high-water mark) Setback from the River, Stream, Creek Setback from the Bank or Bluff Setback from Wetland 20% Slope Area on property Elevation of Floodplain Setback to Well	Measurement 75 85 Feet Feet Feet Yes No Feet 90 Feet

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.

For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

Issuance Information (County	(Use Only)	Sanitary Number:	2 . 2 .	# of bedrooms:	Sanitary Date:				
	ose Offig)	10	8-035 # of bedrooms: 3 Sanitary Date: /-15-18						
Permit Denied (Date):		Reason for Denial:							
Permit #:		Permit Date:							
Is Parcel in Common Ownership	Yes (Deed of Record Yes (Fused/Contigue Yes	ous Lot(s)) No	Mitigation Required Mitigation Attached	CO 2000 C 2000	Affidavit Required				
Granted by Variance (B.O.A.) Yes No Case	y Variance (B.O.A.) Case	# 298 8-25-83 #:							
Was Parcel Legally Creat Was Proposed Building Site Delineat	ted Yes 🗆 No		Were Property Lines Represented by Owner Was Property Surveyed Wese No						
dan the project loc OK to issue				s to narrow elacks.	Zoning District (R1) Lakes Classification (/)				
Date of Inspection: 9-22-2		Inspected by:							
Condition(s): Town, Committee or Boa	ard Conditions Attac	hed? Tes No – (If	No they need to be atta	ached.)					
Structure not for h	uman laak	tohon/sleepin	y purposes.	No pressurize	of water or plumbing				
allowed inside s	structure. n	10st meet an	id Marsta.	n setbacks.	d water or plumbing				
		1							
Signature of Inspector:	1 Norw	05 8			Date of Approval:				
Hold For Sanitary: H	lold For TBA: 🔲 🔃	Hold For Affic	davit: 🗆	Hold For Fees:					

Bayfield County, WI



Real Estate Bayfield County Property Listing

Today's Date: 10/4/2021

Property Status: Current

Created On: 3/15/2006 1:15:35 PM

Description

Updated: 9/6/2016

Tax ID: 20072

PIN: 04-024-2-47-08-34-3 05-006-09000

Legacy PIN:

024110001000

Map ID:

Description:

Municipality: (024) TOWN OF IRON RIVER

STR: S34 T47N R08W

PAR IN GOVT LOT 6 DESC IN V.8 IN

V.1165 P.950 734G

Recorded Acres: 2,160 Calculated Acres: 2,192 Lottery Claims: 1

First Dollar: Yes

Zoning: (R-1) Residential-1

ESN: 118

Tax Districts Updated: 3/15/2006 1 STATE 04 COUNTY 024 TOWN OF IRON RIVER 163297 SCHL-MAPLE 001700 **TECHNICAL COLLEGE**

Recorded Documents

Updated: 11/17/2010 WARRANTY DEED

Date Recorded: 8/31/2016

2016R-565033 1165-950

SPECIAL WARRANTY DEED

Date Recorded: 11/2/2010 2010R-535472 1050-318

SHERIFFS DEED

Date Recorded: 3/11/2010 2010R-531735 1036-701

CONVERSION

Date Recorded: 3/15/2006 347-190 Ownership MARK D & JUDI H ANDERSON

Updated: 2/26/2013 IRON RIVER WI

Billing Address: Mailing Address:

MARK D & JUDI H ANDERSON MARK D & JUDI H ANDERSON PO BOX 35 PO BOX 35

IRON RIVER WI 54847 IRON RIVER WI 54847

Site Address * indicates Private Road

10215 COUNTY HWY H **IRON RIVER 54847**

Property Assessment Updated: 8/2/2012 2021 Assessment Detail Code Acres Land Imp. **G1-RESIDENTIAL** 2.160 144,800 186,400

2-Year Comparison 2020 2021 Change Land: 144,800 144,800 0.0% Improved: 186,400 186,400 0.0% Total: 331,200 331,200 0.0%

Property History

N/A

Town, City, Village, State or Federal Permits May Also Be Required

LAND USE - X SANITARY -SIGN -SPECIAL -CONDITIONAL -BOA -

BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

No.	21-0	0328		Issued	d To: Ma	ark Ar	nderson							
Location:		1/4	of	1/4	Section	34	Township	47	N.	Range	8	W.	Town of	Iron River
Par in														
Gov't Lot	6		Lot		Blo	ck	Sul	odivisio	n				CSM#	

For: Residential: [1-Story]; Accessory Building (Shed) (12' x 28') = 280 sq. ft. Height of 12' 7".

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): Structure not for human habitation/sleeping purposes. No pressurized water or plumbing allowed inside structure. Must meet and maintain setbacks.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

NOTE: This permit expires one year from date of issuance if the authorized construction work or work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed

or if any prohibitory conditions are violated.

Todd Norwood, AZA

Authorized Issuing Official

October 10, 2021

Date